

MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET  
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10-00792

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL INC.	3					
TOTAL DEP.	17					
CLAIMS	74					

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IND.	DEP.	IND.	DEP.
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TOTAL INC.			
TOTAL DEP.			
CLAIMS			

\*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS